

Preliminary Findings on Strategies from Literature

California Mental Health Stigma and
Discrimination Reduction Advisory Committee

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General Strategies for Reducing Stigma and Discrimination

- **Empowerment**
(+) Effective against internal stigma
- **Protest**
(+) Stop behavior (-) Rebound effects
- **Education**
(+) Feasible, exportable, media-friendly (-) Maintenance of effect
- **Consequences**
(+) Can be effective (-) Difficult to coordinate
- **Contact**
(+) Effective, empowerment (-) Exportability

Contact: Making it Effective

- Equals, peers
- Interactive
- Disconfirm stereotypes
- Repeated over time
- Qualify as having a mental illness

Lessons from Others

- World Psychiatric Association
 - Long lasting, not “a campaign”
 - Retain loyalty with broad, realistic goals
 - Deal with the daily problems experienced by consumers and family members
 - Involve others: not an affair of the mental health service system alone
 - Utilize consumers and families in day-to-day functions of program

Lessons from Others

■ World Psychiatric Association, continued

- A model of stigma and discrimination change that can be easily understood, applied
- Prevent fatigue and burnout
- Use modern technology, but also organize face-to-face encounters for participants
- Provide tools to help newcomers to the program
- Evaluation must look at areas identified by consumers and family members, changes in behavior

Lessons from Others

■ National Institute for Mental Health in England review

- Involve users and carers throughout the design, delivery, monitoring and evaluation process
- Support local activities combining a variety of methods and settings
- Address behavior change by developing an environment of intolerance to prejudice and ensure sustainability through policy and legislation
- Use clear consistent messages in targeted ways to specific audiences
- Ensure sustainability through long term planning and funding
- Appropriately monitor and evaluate the programs

Learning from Others

■ New Zealand's Like Minds Like Mine

- Dedicated senior govt. leadership, champions
- Adequate, sustained funding
- Taking the long view by continuing activity over time
- Well defined goals – awareness is not enough
- Clear understanding of intended audience
- Approaching problem in a variety of ways
- Change the message and approach as needed
- Evaluate right from the outset
- Communicate results broadly

Some Research Limitations

■ Diversity

■ Sample size

■ Short-term, not longitudinal

■ Setting

■ Self report

“You may be more racist than you think, study says”
(CNN headline, January 8, 2009). A new study published in Science suggests many people unconsciously harbor racist attitudes, even though they see themselves as tolerant and egalitarian.

Different goals and outcomes measured

- Increase help-seeking behaviors
 - Decrease apprehension about seeking help
- Increase knowledge, “literacy”
 - Decrease belief in myths and misconceptions
- Decrease stigmatizing attitudes
 - Increase positive attitudes (acceptance, respect, trust, empathy)
- Decrease discriminatory behaviors
 - Increase inclusionary behaviors (associating with, hiring, renting to, voluntary services, provide funding)

The challenge we face

Any tactic to tackle discrimination, stigma and social exclusion needs to “acknowledge how the big the power differences are between people with mental health problems and those who discriminate against them. Reducing discrimination must aim to reduce these imbalances in social, economic and political power between people with mental health problems and other citizens.”

Health Scotland, World Health Organization Collaborating Centre (2008). *Stigma: An International Briefing Paper*, p. 11.

In conclusion

We need more research on what actions tackle (discrimination, stigma and social exclusion) most effectively...The gaps in the evidence base, however, underline how important it is for activities...to build in both research and evaluation” so that we might learn as much as possible about what is most effective and share our learning with others.

Despite the lack of evidence of whether an activity may be effective, we are urged to act now and measure the impact of what we attempt.

(Health Scotland, World Health Organization Collaborating Centre (2008), *Stigma: An International Briefing Paper*, p. 20.)